

FORM B10 (Official Form 10) (Rev. 4/98)		United States Bankruptcy Court 61288, Houston TX 77208		SOUTHERN DISTRICT OF TEXAS P.O.Box (Houston Division)		PROOF OF CLAIM	
Name of Debtors <input checked="" type="checkbox"/> Stage Stores, Inc., a Delaware corporation <input type="checkbox"/> Specialty Retailers, Inc., a Texas corporation <input type="checkbox"/> Specialty Retailers, Inc. (NV), a Nevada corporation  *place an "x" beside the name of the Debtor you are filing a claim against				Case Number 00-35078-H2-11 00-35079-H2-11 00-35080-H2-11		Creditor ID#: 788-35014	
Name of Creditor (The person or other entity to whom the debtor owes money or property):  Klis-Fm Nicol-Excel Broadcasting,Llc				<input type="checkbox"/> Check box if you are aware that anyone else a filed a proof of claim relating to your claim. Attach copy of statement giving particulars.		United States District Court Southern District of Texas FILED JUL 1 1 2000 Michael N. Milby, Clerk	
Name and address where notices should be sent:  *****AUTO**MIXED AADC 900 Klis-Fm Nicol-Excel Broadcasting,Llc PO Box 1067 Crockett TX 75835-1067  				<input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case			
				<input type="checkbox"/> Check box if the address differs from the address on the envelope sent to you by the court.			
Account or other number by which creditor identifies debtor:				Check here <input type="checkbox"/> replaces if this claim <input type="checkbox"/> amends a previously filed claim, dated: _____			
1. Basis for Claim <input type="checkbox"/> Goods sold <input checked="" type="checkbox"/> Services performed <input type="checkbox"/> Money loaned <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Taxes <input type="checkbox"/> Other _____				<input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Wages, salaries, and compensation (Fill out below) Your SS#: _____ Unpaid compensation for services performed from _____ to _____ (date) (date)			
2. Date debt was incurred: 4-5-00 to 6-10-00				3. If court judgment, date obtained:			
4. Total Amount of Claim at Time Case Filed: \$ 561.00 If all or part of your claim is secured or entitled to priority, also complete Item 5 or 6 below. <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.							
5. Secured Claim. <input type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff).  Brief Description of Collateral: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other All personal and intangible property of Debtor's Estate  Value of Collateral: \$ _____  Amount of arrearage and other charges at time case filed included in secured claim, if any \$ _____				6. Unsecured Priority Claim. <input type="checkbox"/> Check this box if you have an unsecured priority claim Amount entitled to priority \$ _____ Specify the priority of the claim: <input type="checkbox"/> Wages, salaries, or commissions (up to \$4,300)* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3) <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4). <input type="checkbox"/> Up to \$1,950* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6). <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7). <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a-____). *Amounts are subject to adjustment on 4/1/98 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.			
7. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.				This Space is for Court Use Only			
8. Supporting Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.							
9. Date-Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.							
Date 07-05-00		Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any):		761			
Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.							



## UNITED STATES BANKRUPTCY COURT

Southern District of Texas

## Notice of Chapter 11 Bankruptcy Case, Meeting of Creditors, & Deadlines

A chapter 11 bankruptcy case concerning each of the debtor corporations listed below was filed on June 1, 2000

You may be a creditor of one or more of the debtor(s). **This notice lists important deadlines.** You may want to consult an attorney to protect your rights. All documents filed in the cases may be inspected at the bankruptcy clerk's office at the address listed below.

NOTE: The staff of the bankruptcy clerk's office cannot give legal advice.

### See Reverse Side For Important Explanations.

**Debtor (name(s), case numbers and address):**

Stage Stores, Inc., a Delaware corp.; Case No. 00-35078-H2-11  
Specialty Retailers, Inc., a Texas corp.; Case No. 00-35079-H2-11  
Specialty Retailers, Inc. (NV), a Dallas corp.; Case No. 00-35080-H2-11

10210 Main Street  
Houston, TX 77025-5229

**Toll Free Number: 1-800-804-2013 (for case information)**

**Attorney for Debtors (name and address):**

Andrew E. Jillson, Esq.  
Lynnette R. Warman, Esq.  
Jenkins & Gilchrist, a Professional corporation  
1445 Ross Avenue, Suite 3200  
Dallas, TX 75202-2799

Jointly Administered Under  
Case Number 00-35078-H2-11

**Taxpayer ID Nos:**

76-0407711 (Stage Stores, Inc.)  
74-0821900 (Specialty Retailers, Inc.)  
91-1826900 (Specialty Retailers, Inc. (NV))

**Attorneys for Debtors Telephone Number:**

Toll Free 1-877-559-9672

**Information may also be obtained from the following website:**

Website address: [www.stagestoresbankruptcy.com](http://www.stagestoresbankruptcy.com)

### Meeting of Creditors

Date: 7 / 11 / 00 Time: 2:00 ( ) A.M.  
( X ) P.M.

Location: U.S. Courthouse  
Jury Assembly Room  
515 Rusk, 6<sup>th</sup> Floor  
Houston, Texas 77002

### Deadlines to File a Proof of Claim

Proofs of Claim must be *received* by the bankruptcy clerk's office by the following deadline:

For all creditors (except a governmental unit): 10/9/00

For a governmental unit: 11/28/00

**Mail claim to: U.S. Bankruptcy Court  
P.O. Box 61288  
Houston, TX 77208**

### Creditors May Not Take Certain Actions:

The filing of the bankruptcy case automatically stays certain collection and other actions against the debtor and the debtor's property. If you attempt to collect a debt or take other action in violation of the Bankruptcy Code, you may be penalized.

**Address of the Bankruptcy Clerk's Office:**

515 Rusk Avenue  
1<sup>st</sup> Floor  
Houston, Texas 77002  
Telephone number: 713/250-5115

**For the Court:**

Clerk of the Bankruptcy Court:

Michael N. Milby, Clerk

Hours Open: 9:00 a.m. - 4:30 p.m.

Date:

## INVOICE

## AFFIDAVIT OF SERVICES RENDERED

From: KLIS FM  
NICOL-EXCEL BROADCASTING, LLC  
PO BOX 1067  
CROCKETT, TX 75835

State of TEXAS

County of HOUSTON

The undersigned having been duly sworn,  
deposes and says that the broadcasting  
service has been rendered by radio  
station(s) in accordance with the  
accompanying statement.

By

DATE
4/30/00
Inv Number
284

Subscribed and Sworn to Before Me  
This 2 day of May 2000

Advertiser: BEALLS

BEA300 REYNOLDS MEDIA  
2425 FOUNTAIN VIEW #355  
HOUSTON, TX 77057

NOTARY PUBLIC

ANSEL WAYNE BRADSHAW

My Commission Expires 3/15/2003

Page 1

DATE	Account/Run Detail	Len	Run	Rate	Amount
	Contract 133 / / ONE DAY SALE - 2000				
	ONE DAY SALE 2000				
4/05/00	SPOT 2:50p 3:50p 4:50p 6:15p 6:50p	60	5	16.00	80.00
4/06/00	SPOT 6:50a 7:50a 8:50a 10:15a 10:50a	60	5	16.00	80.00
4/06/00	SPOT 1:15p 1:50p 3:50p 4:15p 4:50p	60	5	16.00	80.00
	Total Sales ----- 240.00		15		
	Discount on Sales				36.00-

WE NOW ACCEPT VISA / MASTERCARD  
THE NUMBER FOR INQUIRIES IS 936 544 9350

Sales Rep: KLIS HOUSE

PLEASE PAY  
THIS AMOUNT

A Finance Charge is computed by a PERIODIC RATE OF 1- $\frac{1}{2}$  PER MONTH, which is an ANNUAL PERCENTAGE  
RATE OF 18 $\frac{1}{2}$ , Added to the unpaid balance at the end of the next month following the date of purchase.

204.00

This invoice was prepared from official station program logs. Times shown are accurate plus or minus 30 minutes



## INVOICE

## AFFIDAVIT OF SERVICES RENDERED

From: KLIS FM  
 NICOL-EXCEL BROADCASTING, LLC  
 PO BOX 1067  
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State of TEXAS

County of HOUSTON

The undersigned having been duly sworn,  
 deposes and says that the broadcasting  
 service has been rendered by radio  
 station(s) in accordance with the  
 accompanying statement.

By \_\_\_\_\_

Advertiser: BEALLS

DATE
5/31/00
Inv Number
338

Subscribed and Sworn to Before Me

This 1 day of June 2000

BEA300 REYNOLDS MEDIA  
 2425 FOUNTAIN VIEW #355  
 HOUSTON, TX 77057

NOTARY PUBLIC

DEANNE ANDERSON

My Commission Expires 7/16/2001

Page 1

DATE	Account/Run Detail	Len	Run	Rate	Amount
	Contract 133 / / ONE DAY SALE - 2000				
	ONE DAY SALE 2000				
5/17/00	SPOT 2:15p 2:50p 3:50p 6:15p 6:50p	60	5	16.00	80.00
5/18/00	SPOT 6:15a 7:15a 8:50a 9:15a 10:15a	60	5	16.00	80.00
5/18/00	SPOT 11:15a 1:15p 2:15p 3:15p 4:15p	60	5	16.00	80.00
	Total Sales ----- 240.00		15		
	Discount on Sales				36.00-

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204.00

This invoice was prepared from official station program logs. Times shown are accurate plus or minus 30 minutes

\*\*\* AFFIDAVIT/INVOICE \*\*\*

KLIS-FM\*NICOL BROADCASTING COMPANY  
P.O. BOX 1067  
CROCKETT, TEXAS 75835

STATION:KLIS

REYNOLDS MEDIA  
2425 FOUNTAIN VIEW #355  
HOUSTON, TX 77057

PAGE: 1 DATE: 07/01/99

ORDER: 1999  
INVOICE: 5003

BEA300 BEALLS

AIR DATE	DESCRIPTION	TIME	LEN	ANNS	RATE	TOTAL
06/09/99	ONE DAY SALE	1420	60	1	12.00	12.00
06/09/99	ONE DAY SALE	1510	60	1	12.00	12.00
06/09/99	ONE DAY SALE	1550	60	1	12.00	12.00
06/09/99	ONE DAY SALE	1610	60	1	12.00	12.00
06/09/99	ONE DAY SALE	1650	60	1	12.00	12.00
06/10/99	ONE DAY SALE	1410	60	1	12.00	12.00
06/10/99	ONE DAY SALE	1420	60	1	12.00	12.00
06/10/99	ONE DAY SALE	1450	60	1	12.00	12.00
06/10/99	ONE DAY SALE	1510	60	1	12.00	12.00
06/10/99	ONE DAY SALE	1520	60	1	12.00	12.00
06/10/99	ONE DAY SALE	1550	60	1	12.00	12.00
06/10/99	ONE DAY SALE	1610	60	1	12.00	12.00
06/10/99	ONE DAY SALE	1620	60	1	12.00	12.00
06/10/99	ONE DAY SALE	1650	60	1	12.00	12.00
06/10/99	ONE DAY SALE	1650	60	1	12.00	12.00
		SUBTOTAL:	60	15	12.00	
					TOTAL CHARGES:	180.00
					LESS AGENCY COMMISSION:	27.00

SALESPERSON: 22 KLIS HOUSE

TOTAL INVOICE AMOUNT: 153.00

THESE TIMES ARE WITHIN THIRTY MINUTES OF ACTUAL AIR TIME. IF THERE ARE ANY  
QUESTIONS REGARDING THIS AFIDAVIT, PLEASE CONTACT THE BUSINESS OFFICE.731-9350

STATION OFFICIAL

NOTARY PUBLIC